

United States Marshals Service
Justice

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF	HARRIET MENEZES	USMS OFFICE	COURT CASE NUMBER
DEFENDANT	SHIRLEY BARBER	36	04-10366-JLT
TYPE OF PROCESS			

SERVE	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
→	SHIRLEY BARBER, DISTRICT COURT DISTRICT OF MASS		
AT	1275 K street NW, WASHINGTON DC 20005-4090		

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:	Number of process to be served with this Form - 285
HARRIET MENEZES 169 THOREAU ST, 8 CONCORD MA 01742	Number of parties to be served in this case
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

SHIRLEY BARBER IS SECRETARY/TREASURER OF
ASSOCIATION OFFLIGHT ATTENDANTS
(202)712-9799

Signature of Attorney or other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF	TELEPHONE NUMBER	DATE
<i>Harriet Menezes</i>	<input type="checkbox"/> DEFENDANT	(978)369-4693	7-26-04

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. 38	District to Serve No. 16	Signature of Authorized USMS Deputy or Clerk <i>Shirley Barber</i>	Date 7/26/04
---	---------------	------------------------------	-----------------------------	---	-----------------

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above) <i>Ed Giovannini, Asst for General Counsel</i>	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.	
Address (complete only if different than shown above) <i>501 3rd Street 9th flr</i>	Date of Service 8/9/04	Time 2:25 pm
	Signature of U.S. Marshal or Deputy <i>M. Sabado</i>	

Service Fee <i>\$45</i>	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
----------------------------	---	----------------	---------------	------------------	--------------------------------	------------------

REMARKS:
7/28/04 Paid D/WA